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Prevalence of Oral Mucosal Lesions In Saveetha Dental College: A Retrospective Study.

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ABSTRACT

The purpose of the present study was to evaluate the prevalence of oral mucosal lesions in Saveetha Dental College, Tamil Nadu ,India. A total of 18527 subjects who visited Saveetha Dental College for various oral complaints over a period of 4 months were interviewed and clinically examined for oral mucosal lesions. Those with lesions were then referred to Oral medicine and radiology department of Saveetha Dental College, wherein a retrospective study was done to evaluate the prevalence of oral mucosal lesions. The result showed the presence of one or more mucosal lesions in (0.1%) of the population. Oral sub mucous fibrosis was observed most frequently (0.26%) followed by lichen planus (0.15%),herpes labialis (0.11%), oral cancer (0.1%) leukoplakia (0.06%), traumatic ulcer (0.05%) recurrent aphthous stomatits (0.02%) lichenoid reaction (0.04%) , smokers palate (0.3%), angular stomatitis (0.02%), denture stomatitis (0.02%), tobacco pouch keratosis (0.01%) candidiasis (0.01%), chemical burn (0.01%) , geographic tongue (0.01%), lupus erythematosus (0.01%) epulis fisuratum (0.01%) allergic stomatitis (0.01%) , anaemic glossitis (0.01%). **Keywords:** oral cavity, mucosal lesions.

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INTRODUCTION

Although the terms dental health and oral health are used almost synonymously when stating the goals for oral health, such statements are usually valid only for dental health. This may lead to severe underestimation of the need for total oral health care. [1] When planning measures for improving oral health, the lack of data may lead to a risk of overlooking diseases of the soft tissues in, and adjacent to, the oral cavity. Prevalence data of oral mucosal lesions are available from many countries, but the information is usually restricted to very few lesions in each survey. Only two studies, [2],[3] with sufficiently large number of individuals, have presented data on a broad spectrum of oral mucosal lesions in a general population.

Hence, the aim of the present study was to evaluate the prevalence of oral mucosal lesions in patients who visited the Department of Oral medicine and Radiology, Saveetha Dental college, India.

METHODS AND METHODOLOGY

A total of 18527 outpatients seeking dental treatment for various oral complaints in Saveetha Dental College from January 1st 2016 to May 1st 2016 were included in the study. All the subjects were examined clinically and questioned regarding any habits like smoking, pan chewing, and alcohol intake, and the frequency and duration of the habit, incidence of any systemic illness, etc.Help from parents or relatives was appreciated while eliciting the history in case of pedodontic patients or patients unable to communicate due to the disease. The patients were examined clinically by trained examiners using artificial light, mouth mirror, gauze, etc. The diagnosis was made based on history, clinical features, and investigations. The patients with mucosal lesions were then referred to the Oral Medicine and Radiology department for advanced management from where statistics were collected in a retrospective fashion and results were tabulated.

DISCUSSION

Oral Submucous Fibrosis:

Oral submucous fibrosis is a condition in which the oral mucosa becomes fibrotic , immobile and contracts progressively causing limitation of mouth opening. More significantly oral submucous fibrosis undergoes malignant transformation in 4-8% of the cases and makes a significant contribution to high incidence of oral cancer in Indian sub continent and Asian immigrant population. In our population the presence of oral submucous fibrosis 0.26%

Lichen Planus:

Lichen planus is a common , chronic inflammatory disease of the skin and mucous membrane comprising of characteristic oral lesions. Reportedly 1-4% of patients with lichen planus undergo malignant transformation. In our population the presence of lichen planus was 0.15%

Oral cancer:

In countries like India and Srilanka , oral cancer accounts for approximately 40% of all cancer rates, which is alarmingly higher when compared to U.K and U.S.A , although incidence rates vary in different parts of the subcontinent . In our population the prevalence of oral cancer was 0.1%.

Herpes Labilais:

After the primary infection, the latent virus gets reactivated in 20-30% of the patients to cause cold sores. Both primary and secondary herpetic infections are contagious with herpetic whitlow being an uncommon hazard to dental surgeons. In our population the prevalence of Herpes labialis was 0.11%.

Leukoplakia:

Leukoplakia maybe defined as a white patch which cannot be scrapped off the mucosa and cannot be ascribed to any specific disease process. The malignant transformation of leukoplakia is low being 1-2% with

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smokers having a higher risk of malignant transformation. In our population the prevalence of Leukoplakia was 0.06%.

Traumatic ulcer:

Traumatic ulcers are usually caused by biting, denture trauma or chemical trauma, with the commonly affected sites being the lips, buccal mucosa, or adjacent to denture flanes. They generally heal a few days after elimination of the cause. If they persist for over 7-10 days post the elimination of the cause then a biopsy is indicated. In our population the prevalence of traumatic ulcer was 0.05%.

Lichenoid reaction:

This term Is given to lichen planus like lesions caused either by systemic drug treatment or those cases where the histological picture is not completely diagnostic. In our population the prevalence of Lichenoid reaction was 0.04%.

Recurrent apthous stomatitis:

Recuurent apthae are common mucosal lesions comprising of painful ulcers recurring at intervals of approximately 3-4 weeks , typically affecting only the keratinized mucosa. In our population the prevalence of recurrent aphthous stomatitis was 0.02%

Smokers palate:

Smokers palate is a grey or white patch on the hard palate , which may contain many papules or nodules that are slightly elevated with red dots in the centre , usually caused due to tobacco smoking. In our population the prevalence of smokers palate was 0.3%.

Angular stomatitis:

Angular stomatitis is typically caused by leakage of candida infected saliva at the angles of the mouth. It can be seen in infantile trush , in denture wearers and chronic hyperplastic candidiasis. In our population the prevalence of angular stomatitis is 0.02%.

Denture stomatitis:

A well fitting upper denture cuts off the underlying mucosa from the protective action of saliva. In susceptible patients this can produce candidiasis seen as a symptomless area of erythema. In our population the prevalence of denture stomatitis was 0.02%

Tobacco Pouch Keratosis:

Habitual chewing of tobacco results in the development of a well-recognized white mucosal lesion in the area of tobacco contact, called tobacco pouch keratosis. In our population the prevalence of Tobacco pouch keratosis was 0.01%.

Candidiasis;

Oral candidiasis is the most prevalent opportunistic infection affecting the oral mucosa. In vast majority of the cases the infection is caused by the yeast Candida albicans. In our population the prevalence of candidiasis was 0.01%

Chemical Burn:

Chemical burn in the oral mucosa occurs as a result of a noxious agent placed in direct contact with the mucosa. In our population the prevalence of chemical burn was 0.01%

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Geographic tongue:

It is clinically characterized by irregular, smooth, red areas on the tongue usually with sharp well defined edge, usually where the filiform papillae stop short. It extends for a few days then heals, only to reappear again a few days later. It is mostly asymptomatic although some patients complain of a burning sensation. In our population the prevalence of geographic tongue was 0.01%

Lupus erthematosis:

Lupus erythematosis is a connective tissue disease which has two main forms systemic and cutaneous , either of which can lead to oral lesions. In our population the prevalence of lupus erythematosis was 0.02%

Epulis fisuratum:

Epulis fisuratum is a benign hyperplasia of fibrous connective tissue which develops as a reactive lesion to chronic mechanical irritation produced by a flange of a poorly fitting denture. In our population the prevalence of epulis fisuratum was 0.1%

Allergic Stomatitis:

Many otherwise harmless substances coming into contact with skin causes hypersensitivity in susceptible individuals leading to an inflammatory condition called allergic stomatitis. In our population the prevalence of allergic stomatitis was 0.01%

Anaemic Glossitis:

Anaemic glossitis is the red, smooth and sore tongue particularly characteristic of iron deficiency and pernicious anemia. In our population the prevalence of anaemic glossitis was 0.01%

RESULT

The result showed the presence of one or more mucosal lesions in (0.1%) of the population. Oral sub mucous fibrosis was observed most frequently (0.26%) followed by lichen planus (0.15%),herpes labialis (0.11%), oral cancer (0.1%) leukoplakia (0.06%), traumatic ulcer (0.05%) recurrent aphthous stomatits (0.02%) lichenoid reaction (0.04%), smokers palate (0.3%), angular stomatitis (0.02%), denture stomatitis (0.02%), tobacco pouch keratosis (0.01%) candidiasis (0.01%), chemical burn (0.01%), geographic tongue (0.01%), lupus erythematosus (0.01%) epulis fisuratum (0.01%) allergic stomatitis (0.01%), anaemic glossitis (0.01%).

CONCLUSION

The result of the present study provides some information on the prevalence of oral mucosal findings in Saveetha Dental College ,Tamil Nadu, India. Habituated patients were advised to give up smoking and other harmful habits. All patients underwent scaling and were advised about individual oral and dental needs.

REFERENCES

- [1] Axell T, Zain RB, Siwamogsthom P, Tantiniran D, Thampipit J. Prevalence of oral soft tissue lesions in out patients at two Malaysian and Thai Dental School Community Dent. Oral Epidemiol 1990;18:95-9.
- [2] Axell T. A prevalence study of oral mucosal lesions in an adult Swedish population. Thesis Odontol Revy 1976;27:1-103.
- [3] Bouquot JE. Common oral lesions found during a mass screening examination. J Am Dent A-7 1986;112:50.

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